1 4 4 1 1 2 22 22 2

SUBTOTAL

TOTAL



## REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

17c. Add lines 17a and 17b in both columns

Debts OWED BY the committee (use Schedule D)
 Debts OWED TO the committee (use Schedule E)

(CFA-4) Summary Sheet

Richard Election Continues and (CO 500-5-17)		FILE NU	MBER	
morning of the control of the contro	Añ 1:55			
assistance in completing this form, see instructions on the reverse side.	TOTALP	AGES IN ENT	TIRE CFA-4 REPORT	
IS THIS AN AMENDMENT? Yes No HAMILTON COLL	TY COURTS			
COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization) Check if this is a new I	name			
2. Acronym or Abbreviated Name (if any)	3. Committee Teld	SF-0503		
		<u> </u>	<del></del>	
4. Mailing Address (address where all campaign finance correspondence is received)	heck if this is a new	address		
5. City, State, ZIP Gode ZN, 46069		ty Affiliation (if applicable)		
	Republic			
CANDIDATE INFORMATION (For Candidate's C				
7. Full Name of Candidate (include any nickname)  8. Party Affiliation or If Independent Candidate  Copyline Company of Candidate			int Candidate	
9. Office Sought (Include district number, if any. Not required for exploratory committee.)				
Marin Adam. Township Board	Hamilt			
TYPE OF REPORT		CONVENTIO	ON CANDIDATES ONLY	
11. Check one:		Check one:		
Pre-Primary Pre-Election Annual Nomination Other		Pre-Con	rvention	
Final/Disbands Committee (lines 18, 19, and 20 must be '07) U Outgoing Treasurer (within 10 days amend Statement of	f Organization)	Post-Co	nvention	
12. Reporting Period:		LUMN A	COLUMN B	
From: Through:	Thi	is Period	Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.		5		
14. Cash on hand end investments January 1, current year.			O	
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)				
15a. Itemized (use Schedule A)	!	<u></u>	<u> </u>	
15b. Uniternized			0	
	OTAL	<u> </u>	0	
	TOTAL	<u> </u>	O	
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		<u> </u>	0	
17b. Uniternized		$\sim$	<i>D</i>	

	CESTIFICATION	
1 CERT	T OF MY KNOWLEDGE AND BELIEF IT IS T	RUE, CORRECT AND COMPLETE.
Signa	Tille Hart Cheasure	Date 1/15/13
Signa	<u> </u>	Date ///5/11
WARN	for sale or used for any commercial purpose.	(IC 3-9-4-5) A gerson who knowingly

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

FOR OFFICE USE ONLY

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### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

#### (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS **Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN
BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse
side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All
cumulative contributions from Individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this
schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds,
rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar
year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an
individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE NUMBER	
Page	of	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
Contributor's Occupation (# required)	<u></u>			
2.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:	,		
	Misc. (specify)			1
Contributor's Occupation (# required)	Contributions:			
3.	Direct			
	n-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specity)	•		
Contributor's Occupation (if required)				
4.	Contributions:			
	In-Kind (describe)			
	I mitalia possinos			
	Other Receipts:			
	Interest Loan			]
	Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	interest Loan			
	Misc. (specify)		1	
Contributor's Occupation (if required)				
	THIS PAGE OF SCHEDULE A	:		
TOTAL OF ALL PAGES OF SCHEDULE				
(Enter total on ITE	M 15a of the Summary Sheet)	10		



## REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a catendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loon proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other Income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER				
Page	of			

		Pa	deo	
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED REGEIVED BY
1.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
2.	Contributions:  Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions: Direct The-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
5.	Contributions:  Direct  In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	: 6		
TOTAL OF ALL PAGES OF SCHEDULE		. 0		